

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	L.I.	1106	8/8/01
RESPONSE FORMALITY REVIEW	M.H	625	10-01-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12-9-01
2	✓	✓	11-6-02
3	✓	✓	11-11-02
4	✓	✓	11-11-02
5	✓	✓	11-11-02
6	✓	✓	11-11-02
7	✓	✓	11-11-02
8	✓	✓	11-11-02
9	✓	✓	11-11-02
10	✓	✓	11-11-02
11	✓	✓	11-11-02
12	✓	✓	11-11-02
13	✓	✓	11-11-02
14	✓	✓	11-11-02
15	✓	✓	11-11-02
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25	✓	✓	11-11-02
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28	✓	✓	11-11-02
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46	✓	✓	11-11-02
47	✓	✓	11-11-02
48	✓	✓	11-11-02
49	✓	✓	11-11-02
50	✓	✓	11-11-02

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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Best Available Copy

10/20/01  
 10/20/01  
 10/20/01